

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 02/14/11

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Condominium</u>	<u>\$ 15,415,867</u>	<u>+5.0%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

With this filing, Allstate is proposing an overall 5.0% rate level change.Condominium Rate Adjustment Factor and Base Rates by zone were revised.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Allstate Indemnity Company

Name of Company

Andi Colosi

Official - Title

**ILLINOIS DEPARTMENT OF INSURANCE  
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective

05/01/11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril (Ultraflex) 11/30/2010	\$11,965,424 (includes Liquor)	+9.5% (includes Liquor)
14. Crop Hail		
15. Other <u>Liquor Liability on Ultraflex</u> 11/30/2010	\$47,178	+18.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised  
liability, property, and liquor liability rates in our Ultraflex program. Revised minimum premiums on Liquor Liability. Our  
proposed liquor liability rates are shown in the enclosed rule pages. Revised minimum premium for package Inland  
Marine coverages. Revised rates for Directors and Officers liability endorsements. Introduction of endorsements and rates  
for Hired and Non-Owned BI, PD, and UM/UIM coverages.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Erie Insurance Exchange

Name of Company



Ross C. Fonticella, ACAS, MAAA  
Vice President and Manager

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 01/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Replant Supplement	68,664	19.0%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Replant Supplement is a private product that supple-  
ments the Federally Reinsured Crop Insurance. We are increasing rates due to poor experience.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Farmers Mutual Hail Insurance Company of Iowa

Name of Company

Dale Farnham - Assistant Vice President

Official - Title

Form (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective  
2/1/11

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Motorcycle</u>	\$4,235,268	+7.0
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Revisions to Territory Base Premiums, Limit of Liability factors, and Multi-Policy premium modifier factor.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which  
will result from applicable new rates.

Foremost Insurance Company Grand Rapids, MI  
Name of Company

\_\_\_\_\_  
David J. Kelly  
Assistant Vice-President  
State Filings

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 02/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Motorcycle	\$90,072	+6.2%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization): Revision to Territories, Base Premiums, Limit of Liability  
factors and Multi-Policy Premium Modifier factor.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Foremost Property and Casualty Insurance Co.

Name of Company

David J. Kelly, Assistant Vice-President, State Filings

Official - Title

**Section 754.EXHIBIT A Summary Sheet (Form RF-3)**

FORM (RF-3)

**SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision  
effective 05/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Businessowners	\$1,558,871.30	-0.018%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain  
Classes? If so,  
specify: No.

Brief description of filing. (If filing follows rates of an advisory  
Organization, specify  
organization):

Removed Glass Coverage. This coverage is offered through our Businessowners Coverage Form

Made editorial revisions throughout the manual

Raised the Spoilage limit from \$50,000 to \$100,000 on the revision.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new  
rates.

Frankenmuth Mutual Insurance Company

Name of Company

Terri Roy, Associate II

Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective April 1, 2011.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Crime</u>	<u>\$26,910</u>	<u>-11.1%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): \_\_\_\_\_

Grinnell Mutual will be adopting new ISO Crime Loss Costs and updating their rate  
manual with a new loss cost multiplier, package modification factors & minimum  
premiums.

- \* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will  
result from application of new rates.

Grinnell Mutual Reinsurance Company  
Name of Company

Mary Wandro - Actuary  
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2011 for new business and 3/1/2011 for renewals

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Farmowner</u>	\$ 51,281	5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

Increase to company loss cost multipliers of 5% \_\_\_\_\_

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

MutualAid eXchange

Name of Company

Lisa Sladek - Senior Compliance Analyst

Official - Title